

B1 (Official Form 1) (04/13)

United States Bankruptcy Court Western District of Oklahoma				Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): Aguilar, Israel			Name of Joint Debtor (Spouse) (Last, First, Middle): Aguilar, Amanda		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): None			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): fka Amanda Boyd		
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 9427			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 7050		
Street Address of Debtor (No. and Street, City, and State) 924 South 8th Street Ponca City, OK			Street Address of Joint Debtor (No. and Street, City, and State) 924 South 8th Street Ponca City, OK		
ZIPCODE 74601			ZIPCODE 74601		
County of Residence or of the Principal Place of Business: Kay			County of Residence or of the Principal Place of Business: Kay		
Mailing Address of Debtor (if different from street address):			Mailing Address of Joint Debtor (if different from street address):		
ZIPCODE			ZIPCODE		
Location of Principal Assets of Business Debtor (if different from street address above):					ZIPCODE
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other N.A.		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding	
Chapter 15 Debtors Country of debtor's center of main interests: _____ Each country in which a foreign proceeding by, regarding, or against debtor is pending: _____		Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)		Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. §101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.	
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).		
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000					
Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Israel Aguilar & Amanda Aguilar

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)Location
Where Filed:

NONE

Case Number:

Date Filed:

Location
Where Filed:

N.A.

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: NONE

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).

X

Signature of Attorney or Debtor(s)

05/12/2015

Date

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box)



Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.



There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.



Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)



Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)



Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and



Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.



Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1) (04/13)

Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Israel Aguilar & Amanda Aguilar

Signatures**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Debtor

Amanda Aguilar
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

05/12/2015

Date

Signature of Attorney*

X

Signature of Attorney for Debtor(s)

JAMES L. MENZER 12406

Printed Name of Attorney for Debtor(s)

Menzer Law Offices, P.C.

Firm Name

211 West Blackwell Avenue

Address

P.O. Box 818 Blackwell, OK 74631-0818

580-363-0800 James.Menzer@MenzerLaw.com

Telephone Number

e-mail

05/12/2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 of title 11 are attached.

☐

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

(Date)

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

B1 D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT
Western District of Oklahoma

In re Israel Aguilar & Amanda Aguilar
 Debtor(s)

Case No. _____
 (if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
 CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: _____


ISRAEL AGUILAR

Date: 05/12/2015

Certificate Number: 03088-OKW-CC-025512822



03088-OKW-CC-025512822

CERTIFICATE OF COUNSELING

I CERTIFY that on May 8, 2015, at 6:59 o'clock PM CDT, Israel Aguilar received from Debt Education and Certification Foundation, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Western District of Oklahoma, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: May 8, 2015 By: /s/Morgan L Quintana

Name: Morgan L Quintana

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

B1 D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT
Western District of Oklahoma

In re Israel Aguilar & Amanda Aguilar
 Debtor(s)

Case No. _____
 (if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
 CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

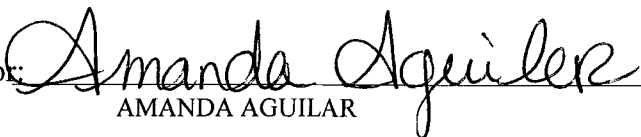
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Joint Debtor:


AMANDA AGUILAR

Date: 05/12/2015

Certificate Number: 03088-OKW-CC-025512823



03088-OKW-CC-025512823

CERTIFICATE OF COUNSELING

I CERTIFY that on May 8, 2015, at 6:59 o'clock PM CDT, Amanda B Aguilar received from Debt Education and Certification Foundation, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Western District of Oklahoma, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: May 8, 2015 By: /s/Morgan L Quintana

Name: Morgan L Quintana

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

B 201B (Form 201B) (12/09)

United States Bankruptcy Court

Western District of Oklahoma

In re Israel Aguilar & Amanda Aguilar
Debtor

Case No. _____
(If known)

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code

Printed name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer or officer,
Principal, responsible person, or partner whose Social
Security number is provided above.

Certification of the Debtor

I, (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code

Israel Aguilar & Amanda Aguilar
Printed Names(s) of Debtor(s)

Case No. (if known) _____

X MA-S 05/12/2015
Signature of Debtor Date
Amanda Aguilar 05/12/2015
Signature of Joint Debtor, (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

B 201A (Form 201A) (12/09)

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

**UNITED STATES BANKRUPTCY COURT
Western District of Oklahoma**

In re:

Israel Aguilar & Amanda Aguilar

Case No.

Chapter 7

Debtor(s)

NOTICES PURSUANT TO 11 U.S.C. §527

(A) All information that you provide with a petition and thereafter during a bankruptcy case is required to be complete, accurate, and truthful;

(B) All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case. The replacement value* of each asset must be stated in those documents where requested after reasonable inquiry to establish such value;

* Replacement value means the value of such property as of the date of the filing of the petition without deduction for costs of sale or marketing. With respect to property acquired for personal, family, or household purposes, replacement value shall mean the price a retail merchant would charge for property of that kind considering the age and condition of the property at the time value is determined. §506(a)(2)

(C) Current monthly income, the amounts specified in section 707(b)(2) and, in a case under chapter 13 of this title, disposable income (determined in accordance with section 707(b)(2)), are required to be stated after reasonable inquiry; and

(D) Information that you provide during your case may be audited pursuant to the Bankruptcy Code, and failure to provide such information may result in dismissal of the case or other sanction, including a criminal sanction.

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER.

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules and Statement of Financial Affairs, as well as in some cases a Statement of Intention need to be prepared correctly and filed with the bankruptcy court.

You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of creditors where you may be questioned by a court official called a `trustee and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice.


Debtor

5/12/2015


Codebtor

5/12/2015

B203
12/94

United States Bankruptcy Court

Western District of Oklahoma

In re Israel Aguilar & Amanda Aguilar

Case No. _____

Chapter 7

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 2,000.00Prior to the filing of this statement I have received \$ 2,000.00Balance Due \$ 0.00

2. The source of compensation paid to me was:

☒ Debtor
 ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor
 ☒ Other (specify)

4. ☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☒ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

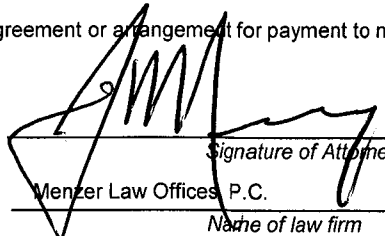
6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

05/12/2015

Date



Signature of Attorney

Mentzer Law Offices, P.C.

Name of law firm

B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court

Western District of Oklahoma

In re Israel Aguilar & Amanda Aguilar
Debtor

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 36,000.00		
B - Personal Property	YES	3	\$ 11,000.00		
C - Property Claimed as exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1		\$ 32,500.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	8		\$ 52,650.00	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 3,677.68
J - Current Expenditures of Individual Debtors(s)	YES	3			\$ 3,640.00
TOTAL		24	\$ 47,000.00	\$ 85,150.00	

United States Bankruptcy Court

Western District of Oklahoma

In re Israel Aguilar & Amanda Aguilar
Debtor

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the Following:

Average Income (from Schedule I, Line 12)	\$ 3,677.68
Average Expenses (from Schedule J, Line 22)	\$ 3,640.00
Current Monthly Income (from Form 22A-1 Line 11; OR , Form 22B Line 14; OR , Form 22C-1 Line 14)	\$ 3,020.32

State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ 0.00
4. Total from Schedule F	\$ 52,650.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ 52,650.00

In re Israel Aguilar & Amanda Aguilar
DebtorCase No. _____
(If known)**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Lots 11, 12 & 13, Block 1, Edwards Addition to the City of Ponca City, Kay County, Oklahoma 924 South 8th Street, Ponca City, OK	JTWROS	J	36,000.00	32,000.00

Total > 36,000.00

(Report also on Summary of Schedules.)

In re Israel Aguilar & Amanda Aguilar

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Bank of America checking account Debtors residence	H	50.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Kitchen appliances, furnishings and furniture Debtors residence	J	600.00
		Dining room table and chairs Debtors residence	J	250.00
		Home electronics Debtors residence	J	400.00
		Master bedroom furniture Debtors residence	J	300.00
		Children bedroom furniture Debtors residence	J	600.00
		Household tools Debtors residence	J	300.00

In re Israel Aguilar & Amanda Aguilar Case No. _____
 Debtor (If known)

SCHEDULE B - PERSONAL PROPERTY
 (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothing Debtors residence	J	600.00
7. Furs and jewelry.		Wedding set and watches Debtors residence	J	500.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			

In re Israel Aguilar & Amanda Aguilar

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X	Personal injury claim against Rowdy Demarquette Debtors residence	W	5,000.00
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.				
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X	2002 Lincoln Towncar Debtors residence	H	1,900.00
25. Automobiles, trucks, trailers, and other vehicles and accessories.				
		2008 Dodge Caravan (inoperable and hail damaged) Debtors residence	W	500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
0 continuation sheets attached Total				\$ 11,000.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

B6C (Official Form 6C) (04/13)

In re Israel Aguilar & Amanda Aguilar

Case No. _____

Debtor

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. § 522(b)(2)☐ Check if debtor claims a homestead exemption that exceeds \$155,675*.☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Lots 11, 12 & 13, Block 1, Edwards Addition to the City of Ponca City, Kay County, Oklahoma	(Husb)OS tit.31 §1(A(1)) (Wife)OS tit.31 §1(A(1))	2,000.00 2,000.00	36,000.00
2002 Lincoln Towncar	(Husb)OS tit.31 §1(A(13))	1,900.00	1,900.00
2008 Dodge Caravan (inoperable and hail damaged)	(Wife)OS tit.31 §1(A(13))	500.00	500.00
Bank of America checking account	(Husb)OS tit.31 §1(A(18))	0.00	50.00
Kitchen appliances, furnishings and furniture	(Husb)OS tit.31 §1(A(3)) (Wife)OS tit.31 §1(A(3))	300.00 300.00	600.00
Dining room table and chairs	(Husb)OS tit.31 §1(A(3)) (Wife)OS tit.31 §1(A(3))	125.00 125.00	250.00
Home electronics	(Husb)OS tit.31 §1(A(3)) (Wife)OS tit.31 §1(A(3))	200.00 200.00	400.00
Master bedroom furniture	(Husb)OS tit.31 §1(A(3)) (Wife)OS tit.31 §1(A(3))	150.00 150.00	300.00
Children bedroom furniture	(Husb)OS tit.31 §1(A(3)) (Wife)OS tit.31 §1(A(3))	300.00 300.00	600.00
Household tools	(Husb)OS tit.31 §1(A(3)) (Wife)OS tit.31 §1(A(3))	150.00 150.00	300.00
Wedding set and watches	(Husb)OS tit.31 §1(A(8)) (Wife)OS tit.31 §1(A(8))	250.00 250.00	500.00
Clothing	(Husb)OS tit.31 §1(A(7)) (Wife)OS tit.31 §1(A(7))	300.00 300.00	600.00
Personal injury claim against Rowdy Demarquette	(Wife)OS tit.31 §1(A(21))	4,500.00	5,000.00
	Total exemptions claimed:	14,450.00	

*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.							
Brad Wicker, Attorney P.O. Box 1840 Ponca City, OK 74602	W	Security: Personal injury claim against Rowdy Demarquette				0.00	0.00
		VALUE \$ 5,000.00					
ACCOUNT NO.							
Martin Patrick Silvy Deborah L. Newsome 3800 West North Avenue Ponca City OK 74601	J	Lien: PMSI Security: Lots 11, 12 & 13, Block 1, Edwards Addition to the City of Ponca City, Kay County, Oklahoma				32,000.00	0.00
		VALUE \$ 36,000.00					
ACCOUNT NO.							
Peachtree Financial Solutions 201 King of Prussia Road, Suite 320 Radnor, PA 19087	W	Security: Personal injury claim against Rowdy Demarquette				500.00	0.00
		VALUE \$ 5,000.00					
Subtotal > (Total of this page)						\$ 32,500.00	\$ 0.00
Total > (Use only on last page)						\$ 32,500.00	\$ 0.00

0 continuation sheets attached

(Report also on
Summary of Schedules)
(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

B6E (Official Form 6E) (04/13)In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(if known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (04/13) - Cont.In re Israel Aguilar & Amanda Aguilar
DebtorCase No. _____
(if known)☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

B6E (Official Form 6E) (04/13) - Cont.

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet) Sec. 507(a)(8)

Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO.									
INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA PA 19101-7346							Notice Only	Notice Only	Notice Only
ACCOUNT NO.									
INTERNAL REVENUE SERVICE SPECIAL PROCEDURES STAFF 55 NORTH ROBINSON OKLAHOMA CITY OK 73102							Notice Only	Notice Only	Notice Only
ACCOUNT NO.									
OKLAHOMA TAX COMMISSION P O BOX 26930 OKLAHOMA CITY OK 73126-0930							Notice Only	Notice Only	Notice Only
ACCOUNT NO.									

Sheet no. 1 of 1 continuation sheets attached to Schedule of
Creditors Holding Priority ClaimsSubtotal >
(Totals of this page)(Use only on last page of the completed
Schedule E.) Report also on the Summary
of Schedules)Totals >
(Use only on last page of the completed
Schedule E. If applicable, report also on
the Statistical Summary of Certain
Liabilities and Related Data.)

\$	0.00	\$	0.00	\$	0.00
\$	0.00				
\$		\$	0.00	\$	0.00

B6F (Official Form 6F) (12/07)

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1st National Bank of Texas P.O. Box 909 Killeen, TX 76540	H					Notice Only
ACCOUNT NO. Amsher Collection Services 600 Beacon Parkway West, Suite 300 Birmingham, AL 35209	W	Consideration: Credit Cards Collecting for TMobile				0.00
ACCOUNT NO. Bank of America P.O. Box 15284 Wilmington, DE 19850	J	Consideration: Overdrawn checking account				1,500.00
ACCOUNT NO. Berlin-Wheeler, Inc. 2942-A SW Wanamaker Dr. Topeka, KS 66614	H	Consideration: Personal loan				550.00
Subtotal >						\$ 2,050.00
Total >						\$

7 continuation sheets attached

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	DEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Cable One 303 North 4th Street Ponca City OK 74601	W	Consideration: Open account				900.00
ACCOUNT NO. Capital One Bank USA P.O. Box 30281 Salt Lake City, UT 84130	H	Consideration: Personal loan				1,500.00
ACCOUNT NO. City of Stillwater P.O. Box 1449 Stillwater, OK 74076-1449	W	Consideration: utilities				500.00
ACCOUNT NO. Claims Management Resources 726 W Sheridan Avenue Oklahoma City, OK 73102	W	Collecting for City of Stillwater				0.00
ACCOUNT NO. Coastal Credit Corp 3852 Virginia Beach Virginia Beach, VA 23452	H	Consideration: Open account				10,500.00

Sheet no. 1 of 7 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 13,400.00

Total >

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. CREDIT BUREAU SERVICES ASSOCIATION 123 WEST 7TH STE 300 STILLWATER OK 74076	W	Collecting for City of Stillwater				0.00
ACCOUNT NO. Credit Collections Inc 2915 North Classen Blvd Suite 100 Oklahoma City, OK 73106	W	Collecting for Taylor-Oldfield Vet Clinic				Notice Only
ACCOUNT NO. Dr. Phillip Knight 400 Fairview Avenue Suite 15 Ponca City, OK 74601		Consideration: Medical Services				Unknown
ACCOUNT NO. Enhanced Recovery Company 8014 Bayberry Rd. Jacksonville, FL 32256	H					500.00
ACCOUNT NO. Enhanced Recovery Company PO Box 57547 Jacksonville, FL 32241	H					Notice Only

Sheet no. 2 of 7 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 500.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBITOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Equinox Collection Service 10159 East 11th Street, Suite 502 Tulsa, OK 74128	J	Collecting for Bank of Oklahoma				0.00
ACCOUNT NO. Express Auto Credit 5350 South Western Avenue, Suite 400 Oklahoma City, OK 73109	H	Consideration: Personal loan				14,000.00
ACCOUNT NO. Field Services, LLC P.O. Box 954 Derby, KS 67037	J	Collecting for Coastal Credit				Notice Only
ACCOUNT NO. Franklin Collection Services 2978 West Jackson Street Tupelo, MS 38803	H	Incurred: 300.00				0.00
ACCOUNT NO. GE Money Bank 1600 Summer Street 5th Floor Stamford, CT 45420-1469	W	Consideration: Credit card debt				1,000.00

Sheet no. 3 of 7 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 15,000.00

Total >

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. James H. Bellingham Bellingham & Loyd, P.C. 620 North Robinson Avenue, Suite 207 Oklahoma City OK 73102		H	Collecting for Coastal Credit				Notice Only
ACCOUNT NO. Midland Funding LLC 8875 Aero Drive, Suite 200 San Diego, CA 92123		W	Collecting for GE Money Bank				Notice Only
ACCOUNT NO. Northern Therapy & Rehabilitation PO Box 908 Ponca City, OK 74602-0908			Consideration: Medical Services				Unknown
ACCOUNT NO. Pinon Trails Apartment 1501 Lomaland Drive El Paso, TX 79935		W					4,500.00
ACCOUNT NO. Residential Data Collect 1210 East Campbell Road, Suite 118 Richardson, TX 75081		W	Collecting for Pinon Trails				Notice Only

Sheet no. 4 of 7 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 4,500.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Richard Robinson Robinson Hoover & Fudge PLLC 119 North Robinson Avenue Suite 1000 Oklahoma City OK 73102		Collecting for Coastal Credit				Notice Only
ACCOUNT NO. SECURITY FINANCE 101 EAST GRAND PONCA CITY OK 74601	H	Consideration: Loan				Notice Only
ACCOUNT NO. Security Finance SFC Centralized Bankruptcy PO Box 1893 Spartanburg, SC, 29304	H	Consideration: Personal loan				5,000.00
ACCOUNT NO. Sun Loan Company 1806 North 5th Street Ponca City, OK 74601	H					1,000.00
ACCOUNT NO. T-Mobile PO Box 37380 Albuquerque, NM 87176-7380	W					Notice Only

Sheet no. 5 of 7 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 6,000.00

Total >

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015-3410	W	Consideration: Phone bill		2,000.00
ACCOUNT NO. Taylor-Oldfield Veterinary Clinic 65073 US HWY 60 Ponca City, OK 74604	W			500.00
ACCOUNT NO. The Ranch Wellness Center 516 East Hartford Avenue Ponca City, OK 74601		Consideration: Medical Services		Unknown
ACCOUNT NO. United Consumer Financial Services 865 Bassett Westlake, OK 44145	H	Consideration: Personal loan		3,100.00
ACCOUNT NO. VERIZON WIRELESS PO BOX 26055 MINNEAPOLIS, MN 55426	H			Notice Only

Sheet no. 6 of 7 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 5,600.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Israel Aguilar & Amanda Aguilar,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Verizon Wireless PO Box 5029 Wallingford, CT 06492		H					1,500.00
ACCOUNT NO. WESTERN SHAMROCK 424 WEST GRAND PONCA CITY OK 74601		H					1,400.00
ACCOUNT NO. Western Shamrock Corporation Attention: Bankruptcy 801 S Abe St. San Angelo, TX, 76903		H					Notice Only
ACCOUNT NO. Win-Co Finance 416 West Grand Avenue Ponca City, OK 74601		H					500.00
ACCOUNT NO. World Acceptance 314 Central Avenue Ponca City, OK 74601		H	Consideration: Personal loan				2,200.00

Sheet no. 7 of 7 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 5,600.00

Total > \$ 52,650.00

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6G (Official Form 6G) (12/07)

In re Israel Aguilar & Amanda Aguilar

Case No. _____

Debtor

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H (Official Form 6H) (12/07)In re Israel Aguilar & Amanda Aguilar

Debtor

Case No. _____

(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1 Israel Aguilar
First Name Middle Name Last Name

Debtor 2 Amanda Aguilar
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of OK

Case number _____
(if known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed
☐ Not employed

Occupation

Heat & Air

Employer's name

Wards Air Conditioning Inc.

Employer's address

209 North 1st Street

Number Street

Ponca City, OK

City State ZIP Code

How long employed there?

8 years

Debtor 2 or non-filing spouse

- ☐ Employed
☒ Not employed

Number Street

City State ZIP Code

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 2,946.66	\$ 0.00
3. Estimate and list monthly overtime pay.	3. + \$ 221.00	+ \$ 0.00
4. Calculate gross income. Add line 2 + line 3.	4. \$ 3,167.66	\$ 0.00

Israel Aguilar

Debtor 1

First Name Middle Name Last Name

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$ 3,167.66	\$ 0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	\$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	\$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	\$ 21.66	\$ 0.00
5d. Required repayments of retirement fund loans	\$ 0.00	\$ 0.00
5e. Insurance	\$ 86.66	\$ 0.00
5f. Domestic support obligations	\$ 0.00	\$ 0.00
5g. Union dues	\$ 0.00	\$ 0.00
5h. Other deductions. Specify: Uniforms - \$14; Tool rental \$6; prepaid legal \$6; 112.66	\$ 112.66	\$ 0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	\$ 220.98	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$ 2,946.68	\$ 0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$ 0.00	\$ 0.00
8b. Interest and dividends	\$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$ 0.00	\$ 0.00
8d. Unemployment compensation	\$ 0.00	\$ 0.00
8e. Social Security	\$ 0.00	\$ 731.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: ;	\$ 0.00	\$ 0.00
8g. Pension or retirement income	\$ 0.00	\$ 0.00
8h. Other monthly income. Specify: ;	\$ 0.00	\$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	\$ 0.00	\$ 731.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 2,946.68	\$ 731.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: ;		\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	\$ 2,946.68	\$ 731.00
13. Do you expect an increase or decrease within the year after you file this form?		\$ 3,677.68
<input checked="" type="checkbox"/> No.		Combined monthly income
<input type="checkbox"/> Yes. Explain:		

Fill in this information to identify your case:

Debtor 1 Israel Aguilar
First Name Middle Name Last Name

Debtor 2 Amanda Aguilar
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of OK

Case number _____
(if known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

son

5

- ☐ No
- ☒ Yes

son

2

- ☐ No
- ☒ Yes

daughter

1

- ☐ No
- ☒ Yes

- ☐ No
- ☐ Yes

- ☐ No
- ☐ Yes

- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?
- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

\$ 478.00

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$ 500.00

4b. \$ 80.00

4c. \$ 50.00

4d. \$ 0.00

Debtor 1 Israel Aguilar
 First Name Middle Name Last Name

Case number (if known) _____

	<u>Your expenses</u>
5. Additional mortgage payments for your residence , such as home equity loans	5. \$ <u>0.00</u>
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ <u>550.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>25.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>75.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>
7. Food and housekeeping supplies	7. \$ <u>600.00</u>
8. Childcare and children's education costs	8. \$ <u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>100.00</u>
10. Personal care products and services	10. \$ <u>50.00</u>
11. Medical and dental expenses	11. \$ <u>300.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>350.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>50.00</u>
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>100.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ <u>332.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

Debtor 1 Israel Aguilar
First Name Middle Name Last Name

Case number (if known) _____

21. **Other.** Specify: _____

21. **+\$** 0.00

22. **Your monthly expenses.** Add lines 4 through 21.
 The result is your monthly expenses.

22. **\$** 3,640.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. **\$** 3,677.68

23b. Copy your monthly expenses from line 22 above.

23b. **-\$** 3,640.00

23c. Subtract your monthly expenses from your monthly income.
 The result is your *monthly net income*.

23c. **\$** 37.68

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?



No.



Yes.

Explain here:

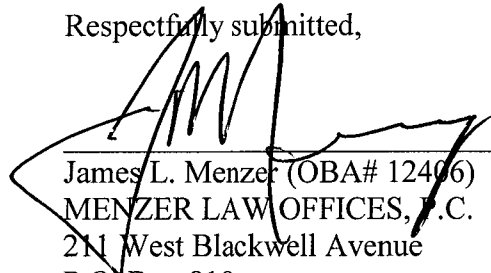
**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF OKLAHOMA**

IN RE:	}
Israel Aguilar,	}
Amanda Aguilar	}Chapter 7
Debtor(s)	}Case #

PAY ADVICE COVER SHEET

Attached hereto are copies of all payment advices or other evidence of payment received by the Debtor(s) from any employer or other source of income within 60 days before the filing of the Petition herein.

Respectfully submitted,



James L. Menzer (OBA# 12406)
MENZER LAW OFFICES, P.C.
211 West Blackwell Avenue
P.O. Box 818
Blackwell, OK 74631-0818
Phone (580) 363-0800
Fax (580) 363-0801

ATTORNEY FOR DEBTOR(S)

209 N. First

P.O. Box 2558

Ponca City, OK 74602

Israel Aguilar
924 S 8th
Ponca City, OK 74601

Employee Pay Stub

Check number: 14225

Pay Period: 04/02/2015 - 04/08/2015

Pay Date: 04/10/2015

Employee	SSN	Status (Fed/State)	Allowances/Extra
Israel Aguilar, 924 S 8th, Ponca City, OK 74601	***-**-9427	Married/Married	Fed-1/0/OK-1/0

Earnings and Hours	Qty	Rate	Current	YTD Amount	Paid Time Off	YTD Used	Available
Regular Hourly Rate	32.00	17.00	544.00	7,896.50	Vacation	48.00	32.00
Vacation Hourly Rate	8.00	17.00	136.00	816.00			
Holiday Hourly Rate				272.00			
Overtime Hourly Rate				663.00			
			680.00	9,647.50			
Deductions From Gross			Current	YTD Amount			
Insurance-Dental			-8.65	-121.10			
AFLAC Pre-tax			-5.56	-77.84			
IRA - A.G Edwards			-5.00	-70.00			
			-19.21	-268.94			
Taxes			Current	YTD Amount			
Extra State			0.00	0.00			
Extra Federal			0.00	0.00			
Medicare Employee Addl Tax			0.00	0.00			
Federal Withholding			-45.00	-822.00			
Social Security Employee			-41.28	-585.81			
Medicare Employee			-9.65	-137.00			
OK - Withholding			-13.00	-246.00			
			-108.93	-1,790.81			
Adjustments to Net Pay			Current	YTD Amount			
Uniforms			-13.77	-192.78			
AFLAC After-tax			-4.85	-67.90			
Tool Rental			-5.33	-71.27			
Pre-Paid Legal			-5.98	-83.72			
Garnishment-IA, Security Financ			-40.00	-560.00			
Garnishment-IA Robinson/Hoover			-50.00	-500.00			
Advance Payback			-75.00	-1,025.00			
Garnishment-IA, Bellingham				-200.00			
Tools				-225.71			
Advance to Employee				1,000.00			
			-194.93	-1,926.38			
Net Pay			356.93	5,661.37			

Israel Aguilar
 924 S 8th
 Ponca City, OK 74601

Employee Pay Stub		Check number: 14218			Pay Period: 03/26/2015 - 04/01/2015		Pay Date: 04/03/2015		
Employee					SSN				
Israel Aguilar, 924 S 8th, Ponca City, OK 74601					***-**-9427				
Earnings and Hours		Qty	Rate	Current	YTD Amount	Paid Time Off		YTD Used	Available
Regular Hourly Rate		40.00	17.00	680.00	7,352.50	Vacation			40.00
Overtime Hourly Rate		2.00	25.50	51.00	663.00				
Holiday Hourly Rate					272.00				
Vacation Hourly Rate					680.00				
				731.00	8,967.50				
Deductions From Gross				Current	YTD Amount				
Insurance-Dental				-8.65	-112.45				
AFLAC Pre-tax				-5.56	-72.28				
IRA - A.G Edwards				-5.00	-65.00				
				-19.21	-249.73				
Taxes				Current	YTD Amount				
Extra State				0.00	0.00				
Extra Federal				0.00	0.00				
Medicare Employee Addl Tax				0.00	0.00				
Federal Withholding				-53.00	-777.00				
Social Security Employee				-44.44	-544.53				
Medicare Employee				-10.39	-127.35				
OK - Withholding				-16.00	-233.00				
				-123.83	-1,681.88				
Adjustments to Net Pay				Current	YTD Amount				
Uniforms				-13.77	-179.01				
AFLAC After-tax				-4.85	-63.05				
Tool Rental				-5.33	-65.94				
Pre-Paid Legal				-5.98	-77.74				
Garnishment-IA, Security Financ				-40.00	-520.00				
Garnishment-IA Robinson/Hoover				-50.00	-450.00				
Advance Payback				-75.00	-950.00				
Garnishment-IA, Bellingham					-200.00				
Tools					-225.71				
Advance to Employee					1,000.00				
				-194.93	-1,731.45				
Net Pay				393.03	5,304.44				

Israel Aguilar
924 S 8th
Ponca City, OK 74601

Employee Pay Stub		Check number: 14195		Pay Period: 03/05/2015 - 03/11/2015		Pay Date: 03/13/2015	
Employee		SSN		Status (Fed/State)		Allowances/Extra	
Israel Aguilar, 924 S 8th, Ponca City, OK 74601		***-**-9427		Married/Married		Fed-1/0/OK-1/0	
Earnings and Hours		Qty	Rate	Current	YTD Amount	Paid Time Off	
Regular Hourly Rate		40.00	17.00	680.00	5,567.50	Vacation	
Holiday Hourly Rate					272.00		
Vacation Hourly Rate					680.00		
Overtime Hourly Rate					599.25		
				680.00	7,118.75		
Deductions From Gross				Current	YTD Amount	YTD Used	
Insurance-Dental				-8.65	-86.50		
AFLAC Pre-tax				-5.56	-55.60		
IRA - A.G Edwards				-5.00	-50.00		
				-19.21	-192.10		
Taxes				Current	YTD Amount	Available	
Extra State				0.00	0.00		
Extra Federal				0.00	0.00		
Medicare Employee Addl Tax				0.00	0.00		
Federal Withholding				-45.00	-661.00		
Social Security Employee				-41.28	-432.55		
Medicare Employee				-9.65	-101.16		
OK - Withholding				-13.00	-201.00		
				-108.93	-1,395.71		
Adjustments to Net Pay				Current	YTD Amount		
Uniforms				-13.77	-137.70		
AFLAC After-tax				-4.85	-48.50		
Tool Rental				-5.33	-49.95		
Pre-Paid Legal				-5.98	-59.80		
Garnishment-IA, Security Financ				-40.00	-400.00		
Garnishment-IA Robinson/Hoover				-50.00	-300.00		
Advance Payback				-75.00	-725.00		
Tools				-20.00	-200.00		
Garnishment-IA, Bellingham					-200.00		
Advance to Employee					1,000.00		
				-214.93	-1,120.95		
Net Pay				336.93	4,409.99		

Israel Aguilar
 924 S 8th
 Ponca City, OK 74601

Employee Pay Stub		Check number: 14187		Pay Period: 02/26/2015 - 03/04/2015		Pay Date: 03/06/2015	
Employee				SSN			
Israel Aguilar, 924 S 8th, Ponca City, OK 74601				***-**-9427			
Earnings and Hours		Qty	Rate	Current	YTD Amount	Paid Time Off	YTD Used Available
Regular Hourly Rate		35.00	17.00	595.00	4,887.50	Vacation	40.00
Holiday Hourly Rate					272.00		
Vacation Hourly Rate					680.00		
Overtime Hourly Rate					599.25		
				595.00	6,438.75		
Deductions From Gross				Current	YTD Amount		
Insurance-Dental				-8.65	-77.85		
AFLAC Pre-tax				-5.56	-50.04		
IRA - A.G Edwards				-5.00	-45.00		
				-19.21	-172.89		
Taxes				Current	YTD Amount		
Extra State				0.00	0.00		
Extra Federal				0.00	0.00		
Medicare Employee Addl Tax				0.00	0.00		
Federal Withholding				-33.00	-616.00		
Social Security Employee				-36.01	-391.27		
Medicare Employee				-8.42	-91.51		
OK - Withholding				-9.00	-188.00		
				-86.43	-1,286.78		
Adjustments to Net Pay				Current	YTD Amount		
Uniforms				-13.77	-123.93		
AFLAC After-tax				-4.85	-43.65		
Tool Rental				-5.33	-44.62		
Pre-Paid Legal				-5.98	-53.82		
Garnishment-IA, Security Financ				-40.00	-360.00		
Garnishment-IA Robinson/Hoover				-50.00	-250.00		
Advance Payback				-75.00	-650.00		
Tools				-20.00	-180.00		
Garnishment-IA, Bellingham					-200.00		
Advance to Employee					1,000.00		
				-214.93	-906.02		
Net Pay				274.43	4,073.06		

Israel Aguilar
 924 S 8th
 Ponca City, OK 74601

Employee Pay Stub		Check number: 14180		Pay Period: 02/19/2015 - 02/25/2015		Pay Date: 02/27/2015		
Employee				SSN				
Israel Aguilar, 924 S 8th, Ponca City, OK 74601				***-**-9427				
Earnings and Hours		Qty	Rate	Current	YTD Amount	Paid Time Off	YTD Used	Available
Regular Hourly Rate		40.00	17.00	680.00	4,292.50	Vacation		40.00
Holiday Hourly Rate					272.00			
Vacation Hourly Rate					680.00			
Overtime Hourly Rate					599.25			
				680.00	5,843.75			
Deductions From Gross				Current	YTD Amount			
Insurance-Dental				-8.65	-69.20			
AFLAC Pre-tax				-5.56	-44.48			
IRA - A.G Edwards				-5.00	-40.00			
				-19.21	-153.68			
Taxes				Current	YTD Amount			
Extra State				0.00	0.00			
Extra Federal				0.00	0.00			
Medicare Employee Addl Tax				0.00	0.00			
Federal Withholding				-45.00	-583.00			
Social Security Employee				-41.27	-355.26			
Medicare Employee				-9.66	-83.09			
OK - Withholding				-13.00	-179.00			
				-108.93	-1,200.35			
Adjustments to Net Pay				Current	YTD Amount			
Uniforms				-13.77	-110.16			
AFLAC After-tax				-4.85	-38.80			
Tool Rental				-5.33	-39.29			
Pre-Paid Legal				-5.98	-47.84			
Garnishment-IA, Security Financ				-40.00	-320.00			
Garnishment-IA Robinson/Hoover				-50.00	-200.00			
Advance Payback				-75.00	-575.00			
Tools				-20.00	-160.00			
Garnishment-IA, Bellingham					-200.00			
Advance to Employee					1,000.00			
				-214.93	-691.09			
Net Pay				336.93	3,798.63			

Israel Aguilar
 924 S 8th
 Ponca City, OK 74601

Employee Pay Stub		Check number: 14170		Pay Period: 02/12/2015 - 02/18/2015		Pay Date: 02/20/2015		
Employee				SSN				
Israel Aguilar, 924 S 8th, Ponca City, OK 74601				***-**-9427				
Earnings and Hours		Qty	Rate	Current	YTD Amount	Paid Time Off	YTD Used	Available
Regular Hourly Rate		26.00	17.00	442.00	3,612.50	Vacation		40.00
Holiday Hourly Rate					272.00			
Vacation Hourly Rate					680.00			
Overtime Hourly Rate					599.25			
				442.00	5,163.75			
Deductions From Gross				Current	YTD Amount			
Insurance-Dental				-8.65	-60.55			
AFLAC Pre-tax				-5.56	-38.92			
IRA - A.G Edwards				-5.00	-35.00			
				-19.21	-134.47			
Taxes				Current	YTD Amount			
Extra State				0.00	0.00			
Extra Federal				0.00	0.00			
Medicare Employee Addl Tax				0.00	0.00			
Federal Withholding				-18.00	-538.00			
Social Security Employee				-26.53	-313.99			
Medicare Employee				-6.20	-73.43			
OK - Withholding				-2.00	-166.00			
				-52.73	-1,091.42			
Adjustments to Net Pay				Current	YTD Amount			
Uniforms				-13.77	-96.39			
AFLAC After-tax				-4.85	-33.95			
Tool Rental				-5.33	-33.96			
Pre-Paid Legal				-5.98	-41.86			
Garnishment-IA, Security Financ				-40.00	-280.00			
Garnishment-IA Robinson/Hoover				-50.00	-150.00			
Advance Payback				-50.00	-500.00			
Tools				-20.00	-140.00			
Garnishment-IA, Bellingham					-200.00			
Advance to Employee					1,000.00			
				-189.93	-476.16			
Net Pay				180.13	3,461.70			

B6 (Official Form 6 - Declaration) (12/07)

Israel Aguilar & Amanda Aguilar

In re

Debtor

Case No.

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 05/12/2015Signature: 

Debtor

Date 05/12/2015Signature: 

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,
of Bankruptcy Petition Preparer

Social Security No.
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the _____ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the _____ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: _____

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT

Western District of Oklahoma

In Re Israel Aguilar & Amanda AguilarCase No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal year rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2015(db)	7890.00	wages
2014(db)	37392.00	wages
2013(db)	32857.00	Wages
2015(jdb)		
2014(jdb)		
2013(jdb)		

2. Income other than from employment or operation of business

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

(db)

(db)

2015(jdb) 2852.00 SSI

(jdb)

3. Payments to creditors

None

☒

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF
PAYMENTSAMOUNT
PAIDAMOUNT STILL
OWING

None

☒

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after date of adjustment.*

NAME AND ADDRESS OF CREDITOR
AND RELATIONSHIP TO DEBTORDATES OF
PAYMENTSAMOUNT
PAIDAMOUNT STILL
OWING

None



c. *All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
--	----------------------	-------------	-----------------------

4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Coastal Credit v. Israel Aguilar; CS-2013-2024	Collection	Cleveland County	Judgment
Win-Co Finance v. Israel Aguilar; #SC-2014-487	Collection	Kay County	Judgment

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
Coastal Credit LLC c/o James H. Bellingham Bellingham & Loyd, P.C. 620 North Robinson Avenue, Suite 207 Oklahoma City OK 73102	Beginning March 2014	Garnishment of wages \$4400.00 thru 2014 then \$100 per month beginning 2015

5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
--	---	--------------------------------------

6. Assignments and Receiverships

None



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
------------------------------------	--------------------	---

None



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
-------------------------------------	--	------------------	--------------------------------------

7. Gifts

None



List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
--	-----------------------------------	-----------------	----------------------------------

8. Losses

None



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION
AND VALUE
OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS
WAS COVERED IN WHOLE OR IN PART BY
INSURANCE, GIVE PARTICULARS

DATE OF
LOSS

9. Payments related to debt counseling or bankruptcy

None



List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS
OF PAYEE

DATE OF PAYMENT,
NAME OF PAYOR IF
OTHER THAN DEBTOR

AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY

James L. Menzer
Menzer Law Offices, P.C.
211 West Blackwell Avenue
P.O. Box 818
Blackwell, OK 74631-0818

2014

\$2000.00

10. Other transfers

None



a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,
RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY
TRANSFERRED AND
VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None



NAME OF TRUST OR OTHER DEVICE

DATE(S) OF
TRANSFER(S)

AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY
OR DEBTOR'S INTEREST
IN PROPERTY

11. Closed financial accounts

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS
OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR
DIGITS OF ACCOUNT NUMBER,
AND AMOUNT OF FINAL BALANCE

AMOUNT AND
DATE OF SALE
OR CLOSING

12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF BANK
OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF
THOSE WITH ACCESS TO BOX
OR DEPOSITORY

DESCRIPTION OF
CONTENTS

DATE OF
TRANSFER OR
SURRENDER, IF ANY

13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE
OF
SETOFF

AMOUNT
OF
SETOFF

14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.



NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
------------------------------	--------------------------------------	----------------------

15. Prior address of debtor

None ☒



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
---------	-----------	--------------------

16. Spouses and Former Spouses

None ☒



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None ☒



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
--------------------------	--	-------------------	----------------------

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME
AND ADDRESS

NAME AND ADDRESS
OF GOVERNMENTAL UNIT

DATE OF
NOTICE

ENVIRONMENTAL
LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS
OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None



a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
------	--	---------	--------------------	-------------------------------

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



NAME

ADDRESS

[Questions 19 - 25 are not applicable to this case]

* * * * *

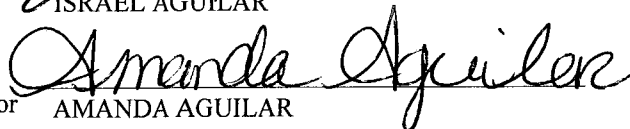
B7 (Official Form 7) (04/13)

9

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 05/12/2015Signature
of Debtor

ISRAEL AGUILAR
Date 05/12/2015Signature
of Joint Debtor

AMANDA AGUILAR
0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

**UNITED STATES BANKRUPTCY COURT
Western District of Oklahoma**

In re Israel Aguilar & Amanda Aguilar,
Debtor

Case No. _____

Chapter 7

VERIFICATION OF LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 5 pages, is true, correct and complete to the best of my knowledge.

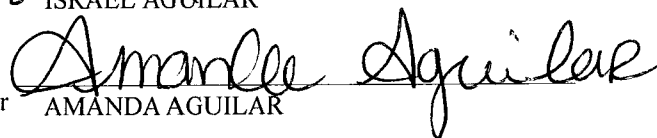
Date 05/12/2015

Signature
of Debtor


ISRAEL AGUILAR

Date 05/12/2015

Signature
of Joint Debtor


AMANDA AGUILAR

1ST NATIONAL BANK OF TEXAS
PO BOX 909
KILLEEN TX 76540

AMSHER COLLECTION SERVICES
600 BEACON PARKWAY WEST SUITE 300
BIRMINGHAM AL 35209

BANK OF AMERICA
PO BOX 15284
WILMINGTON DE 19850

BERLIN-WHEELER INC
2942-A SW WANAMAKER DR
TOPEKA KS 66614

BRAD WICKER ATTORNEY
PO BOX 1840
PONCA CITY OK 74602

CABLE ONE
303 NORTH 4TH STREET
PONCA CITY OK 74601

CAPITAL ONE BANK USA
PO BOX 30281
SALT LAKE CITY UT 84130

CITY OF STILLWATER
PO BOX 1449
STILLWATER OK 74076-1449

CLAIMS MANAGEMENT RESOURCES
726 W SHERIDAN AVENUE
OKLAHOMA CITY OK 73102

COASTAL CREDIT CORP
3852 VIRGINIA BEACH
VIRGINIA BEACH VA 23452

CREDIT BUREAU SERVICES ASSOCIATION
123 WEST 7TH STE 300
STILLWATER OK 74076

CREDIT COLLECTIONS INC
2915 NORTH CLASSEN BLVD SUITE 100
OKLAHOMA CITY OK 73106

DR PHILLIP KNIGHT
400 FAIRVIEW AVENUE SUITTE 15
PONCA CITY OK 74601

ENHANCED RECOVERY COMPANY
8014 BAYBERRY RD
JACKSONVILLE FL 32256

ENHANCED RECOVERY COMPANY
PO BOX 57547
JACKSONVILLE FL 32241

EQUINOX COLLECTION SERVICE
10159 EAST 11TH STREET SUITE 502
TULSA OK 74128

EXPRESS AUTO CREDIT
5350 SOUTH WESTERN AVENUE SUITE 400
OKLAHOMA CITY OK 73109

FIELD SERVICES LLC
PO BOX 954
DERBY KS 67037

FRANKLIN COLLECTION SERVICES
2978 WEST JACKSON STREET
TUPELO MS 38803

GE MONEY BANK
1600 SUMMER STREET 5TH FLOOR
STAMFORD CT 06902-1469

INTERNAL REVENUE SERVICE
PO BOX 7346
PHILADELPHIA PA 19101-7346

INTERNAL REVENUE SERVICE
SPECIAL PROCEDURES STAFF
55 NORTH ROBINSON
OKLAHOMA CITY OK 73102

JAMES H BELLINGHAM
BELLINGHAM LOYD PC
620 NORTH ROBINSON AVENUE SUITE 207
OKLAHOMA CITY OK 73102

MARTIN PATRICK SILVY
DEBORAH L NEWSOME
3800 WEST NORTH AVENUE
PONCA CITY OK 74601

MIDLAND FUNDING LLC
8875 AERO DRIVE SUITE 200
SAN DIEGO CA 92123

NORTHERN THERAPY REHABILITATION
PO BOX 908
PONCA CITY OK 74602-0908

OKLAHOMA TAX COMMISSION
P O BOX 26930
OKLAHOMA CITY OK 73126-0930

PEACHTREE FINANCIAL SOLUTIONS
201 KING OF PRUSSIA ROAD SUITE 320
RADNOR PA 19087

PINON TRAILS APARTMENT
1501 LOMALAND DRIVE
EL PASO TX 79935

RESIDENTIAL DATA COLLECT
1210 EAST CAMPBELL ROAD SUITE 118
RICHARDSON TX 75081

RICHARD ROBINSON
ROBINSON HOOVER FUDGE PLLC
119 NORTH ROBINSON AVENUE SUITE 1000
OKLAHOMA CITY OK 73102

SECURITY FINANCE
101 EAST GRAND
PONCA CITY OK 74601

SECURITY FINANCE
SFC CENTRALIZED BANKRUPTCY
PO BOX 1893
SPARTANBURG SC 29304

SUN LOAN COMPANY
1806 NORTH 5TH STREET
PONCA CITY OK 74601

T-MOBILE
PO BOX 37380
ALBUQUERQUE NM 87176-7380

T-MOBILE BANKRUPTCY TEAM
PO BOX 53410
BELLEVUE WA 98015-3410

TAYLOR-OLDFIELD VETERINARY CLINIC
65073 US HWY 60
PONCA CITY OK 74604

THE RANCH WELLNESS CENTER
516 EAST HARTFORD AVENUE
PONCA CITY OK 74601

UNITED CONSUMER FINANCIAL SERVICES
865 BASSETT
WESTLAKE OK 44145

VERIZON WIRELESS
PO BOX 26055
MINNEAPOLIS MN 55426

VERIZON WIRELESS
PO BOX 5029
WALLINGFORD CT 06492

WESTERN SHAMROCK
424 WEST GRAND
PONCA CITY OK 74601

WESTERN SHAMROCK CORPORATION
ATTENTION BANKRUPTCY
801 S ABE ST
SAN ANGELO TX 76903

WIN-CO FINANCE
416 WEST GRAND AVENUE
PONCA CITY OK 74601

WORLD ACCEPTANCE
314 CENTRAL AVENUE
PONCA CITY OK 74601

Fill in this information to identify your case:

Debtor 1 Israel Aguilar
 First Name Middle Name Last Name

Debtor 2 Amanda Aguilar
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of OK
 (State)

Case number _____
 (If known)

Check one box only as directed in this form and in Form 22A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 22A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 22A-1

Chapter 7 Statement of Your Current Monthly Income

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 22A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ Not married. Fill out Column A, lines 2-11.
- ☒ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☐ Married and your spouse is NOT filing with you. You and your spouse are:
- ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

- | | | |
|--|-------------|---------|
| 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). | \$ 3,020.32 | \$ 0.00 |
| 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | \$ 0.00 | \$ 0.00 |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. | \$ 0.00 | \$ 0.00 |
| 5. Net income from operating a business, profession, or farm | | |
| Gross receipts (before all deductions) | \$ 0.00 | |
| Ordinary and necessary operating expenses | – \$ 0.00 | |
| Net monthly income from a business, profession, or farm | \$ 0.00 | \$ 0.00 |
| 6. Net income from rental and other real property | | |
| Gross receipts (before all deductions) | \$ 0.00 | |
| Ordinary and necessary operating expenses | – \$ 0.00 | |
| Net monthly income from rental or other real property | \$ 0.00 | \$ 0.00 |
| 7. Interest, dividends, and royalties | \$ 0.00 | \$ 0.00 |

Debtor 1 Israel Aguilar
First Name Middle Name Last Name

Case number (if known) _____

8. Unemployment compensationDo not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \downarrow For you \$ 0.00
For your spouse..... \$ 0.00Column A
Debtor 1\$ 0.00Column B
Debtor 2 or
non-filing spouse\$ 0.00**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.\$ 0.00\$ 0.00**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.10a. _____ \$ 0.00\$ 0.00\$ 0.0010b. _____ \$ 0.00\$ 0.00\$ 0.00

10c. Total amounts from separate pages, if any.

+\$ 0.00+\$ 0.00**11. Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.\$ 3,020.32

+

\$ 0.00

=

\$ 3,020.32Total current monthly
income**Part 2: Determine Whether the Means Test Applies to You****12. Calculate your current monthly income for the year.** Follow these steps:12a. Copy your total current monthly income from line 11..... Copy line 11 here \rightarrow 12a. \$ 3,020.32

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b. \$ 36,243.84**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

Oklahoma

Fill in the number of people in your household.

5

Fill in the median family income for your state and size of household.13.

\$ 72,548.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*
Go to Part 3.14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 22A-2.*
Go to Part 3 and fill out Form 22A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

x Israel Aguilar
Signature of Debtor 1x Israel Aguilar
Signature of Debtor 2Date 05/12/2015
MM / DD / YYYYDate 05/12/2015
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 22A-2.

If you checked line 14b, fill out Form 22A-2 and file it with this form.

Debtor 1 Israel Aguilar
First Name Middle Name Last Name

Case Number (if known) _____

Form 22 Continuation Sheet**Monthly Income****Month 1**

Gross wages, salary, tips...	3,167.66	0.00
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 3

Gross wages, salary, tips...	2,946.66	0.00
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 5

Gross wages, salary, tips...	2,946.66	0.00
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 2

Gross wages, salary, tips...	3,167.66	0.00
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 4

Gross wages, salary, tips...	2,946.66	0.00
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 6

Gross wages, salary, tips...	2,946.66	0.00
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Additional Items as Designated, if any**Remarks**

B8 (Official Form 8) (12/08)

UNITED STATES BANKRUPTCY COURT

Western District of Oklahoma

Israel Aguilar & Amanda Aguilar

In re _____, Case No. _____
 Debtor Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. *(Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)*

Property No. 1	
Creditor's Name: Martin Patrick Silvy Deborah L. Newsome 3800 West North Avenue Ponca City OK 74601	Describe Property Securing Debt: Lots 11, 12 & 13, Block 1, Edwards Addition to the City of Ponca City, Kay County, Oklahoma
<p>Property will be <i>(check one)</i>:</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained </div> <p>If retaining the property, I intend to <i>(check at least one)</i>:</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ using 11 U.S.C. §522(f). </div> <div style="text-align: right;">(for example, avoid lien)</div> </div> <p>Property is <i>(check one)</i>:</p> <div style="display: flex; justify-content: space-around;"> <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt </div>	

Property No. 2 <i>(if necessary)</i>	
Creditor's Name:	Describe Property Securing Debt:
<p>Property will be <i>(check one)</i>:</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained </div> <p>If retaining the property, I intend to <i>(check at least one)</i>:</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ using 11 U.S.C. §522(f). </div> <div style="text-align: right;">(for example, avoid lien)</div> </div> <p>Property is <i>(check one)</i>:</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt </div>	

PART B - Personal property subject to unexpired leases. *(All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)*

Property No. 1 NO Leased Property		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 2 <i>(if necessary)</i>		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

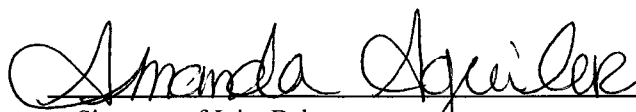
Property No. 3 <i>(if necessary)</i>		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

0 continuation sheets attached *(if any)*

I declare under penalty of perjury that the above indicates my intention as to any property of my Estate securing debt and/or personal property subject to an unexpired lease.

Date: 05/12/2015


Signature of Debtor


Signature of Joint Debtor